NRL CODE 1008 02 FC:1501 03 FC:8001

1400.00 DA 300.00 DA 69.00 DA

2002

PART B - FEE(S) TRANSMITTAL

e and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

or <u>Fax</u>				Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000			
INSTRUCTIONS: This form appropriate. All further correindicated unless corrected be maintenance fee notifications	n should be used for tran espondence including the l low or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a)	E FEE and PUBLIC ders and notification) specifying a new o	ATION FEE (if request of maintenance fees orrespondence address	uired). Blocks 1 through 5 s will be mailed to the current ; and/or (b) indicating a sep	should be completed where correspondence address as arate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must			
26384 7590 06/28/2005				have its own certifica	te of mailing or transmission.	on or joined waving, must	
NAVAL RESEARCH LABORATORY ASSOCIATE COUNSEL (PATENTS) CODE 1008.2 4555 OVERLOOK AVENUE, S.W. WASHINGTON, DC 20375-5320				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the data indicated below. (Depositor's name)			
						(Date)	
APPLICATION NO.	CATION NO. FILLING DATE FIRST NAMED I		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/774,653	10/774,653 02/04/2004 David A. Cylii			r	95,938	1077	
APPLN, TYPE	SMALL ENTITY	ISSUE FT	E PI	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
L	nonprovisional NO \$1400			\$300	\$1700	09/28/2005	
					, -	55,54,5555	
EXAMINER		ART UNIT		ASS-SUBCLASS	J		
COLLINS, TIMOTHY D 1. Change of correspondence address or indication of "Fee Address" CFR 1.363).				244-022000			
L Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) anached. C) the negative PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 register.				es of up to 3 registered patent attorneys R alternatively, of a single firm (having as a member a torney or agent) and the names of up to patent attorneys or agents. If no name is me will be printed.			
3. ASSIGNEE NAME AND E PLEASE NOTE: Unless a recordation as set forth in 3	•		-		nee is identified below, the o	focument has been filed for	
	OF AMERICA A	.s		Y and STATE OR CO	UNTRY)		
REPRÉSENTED E	BY THE SECRETA	RY OF THE	NAVY				
Please check the appropriate a	ssignee category or categor	ries (will not be pri	nted on the patent):	Individual 🔲 🤇	Corporation or other private gr	oup entity (1) Government	
4a. The following fee(s) are enclosed: 4b. Payment of Fee I Issue Fee A check in the							
				amount of the fee(s) is enclosed. edit card. Form PTO-2038 is attached.			
Advance Order - # of C	The Director is t	The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to osit Account Number 50-0201 (chclose an extra copy of this form).					
5. Change in Entity Status (F	rom status indicated above ALL ENTITY status, Sec 1	•	b. Applicant is no	longer claiming SMA	LL ENTITY status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO is NOTE: The Issue Fee and Pub interest as shown by the record	requested to apply the Issu blication Fee (if required) w is of the United States Pate	e Fee and Publicat vill not be accepted int and Trademark	ion Fee (if any) or to from anyone other th Office.	re-apply any previous an the applicant; a reg	ly paid issue fee to the application of attorney or agent; or the	stion identified above. he assignee or other party in	
Authorized Signature	Sally a.J.	west		. Date	7/5/2005		
Typed or printed name	Sally A. Ferr				No46,325		
This collection of information an application. Confidentiality submitting the completed appl this form and/or suggestions ff Box 1450, Alexandra, Virgini Alexandria, Virgini 22313-14 Under the Paperwork Reduction							
me i sperwork reduction	~ ~ ~ ~ ~ 1272, NO PERSONS	me reduited in test	have in a contection o	TOTOL BOTTON TO TEST IX	CONTRACTOR OF THE PROPERTY OF		